

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Western District of Washington

Case number (If known): _____

Chapter you are filing under:

☐

Chapter 7

☒

Chapter 11

☐

Chapter 12

☐

Chapter 13

☐

Check if this is an
amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

About Debtor 1:

Kristie

First name

Edna

Middle name

Bumstead

Last name

Suffix (Sr., Jr, II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name

Suffix (Sr., Jr, II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

First name

Middle name

Last name

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Business name (if applicable)

Business name (if applicable)

First name

Middle name

Last name

Business name (if applicable)

Business name (if applicable)

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 3 2 7 1

OR

9xx - xx - ____

xxx - xx - ____

OR

9xx - xx - ____

About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):	
4. Your Employer Identification Number (EIN), if any.	<div><div>93-4049058</div><div>EIN</div></div>		<div><div></div><div>EIN</div></div>
	<div><div></div><div>EIN</div></div>		<div><div></div><div>EIN</div></div>
5. Where you live		If Debtor 2 lives at a different address:	
<div><div>6229 Bock Avenue</div><div>Number Street</div></div>		<div><div></div><div>Number Street</div></div>	
<div><div>Sumner, WA 98390</div><div>City State ZIP Code</div></div>		<div><div></div><div>City State ZIP Code</div></div>	
<div><div>Pierce</div><div>County</div></div>		<div><div></div><div>County</div></div>	
<div><div>If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.</div><div><div></div><div>Number Street</div></div><div><div></div><div>P.O. Box</div></div><div><div></div><div>City State ZIP Code</div></div></div>		<div><div>If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.</div><div><div></div><div>Number Street</div></div><div><div></div><div>P.O. Box</div></div><div><div></div><div>City State ZIP Code</div></div></div>	
6. Why you are choosing this district to file for bankruptcy			
<div><div>Check one:</div><div><div><input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</div><div><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408)</div></div><div><div></div><div></div><div></div><div></div></div></div>		<div><div>Check one:</div><div><div><input type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</div><div><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408)</div></div><div><div></div><div></div><div></div><div></div></div></div>	

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☐ Chapter 7

☒ Chapter 11

☐ Chapter 12

☐ Chapter 13

8. How you will pay the fee

☒ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

☒ No.

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

☒ No.

☐ Yes. Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. Do you rent your residence?

☒ No. Go to line 12.

☐ Yes. Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☐ No. Go to Part 4.
 ☒ Yes. Name and location of business

DBA CLARITY CAPITAL MANAGEMENT

Name of business, if any

909 Alder Ave Ste 102

Number

Street

Sumner

WA

98390

City

State

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
 ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
 ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
 ☒ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

☐ No. I am not filing under Chapter 11.
 ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
 ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
 ☒ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

Official Form 101

Case 24-40245-BDL

Doc 1

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Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

☒ No.

☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number

Street

City

State

ZIP Code

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Official Form 101

Case 24-40245-BDL

Voluntary Petition for Individuals Filing for Bankruptcy

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?
- 16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☒ No. Go to line 16b.
☐ Yes. Go to line 17.
- 16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
☒ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer debts or business debts.
- _____

17. Are you filing under Chapter 7? ☒ No. I am not filing under Chapter 7. Go to line 18.
☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No
☐ Yes
- Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

18. How many creditors do you estimate that you owe?
- ☒ 1-49 ☐ 1,000-5,000 ☐ 25,001-50,000 ☐ 50,000-100,000 ☐ More than 100,000
☐ 50-99 ☐ 5,001-10,000
☐ 100-199 ☐ 10,001-25,000
☐ 200-999

19. How much do you estimate your assets to be worth?
- ☐ \$0-\$50,000 ☒ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

20. How much do you estimate your liabilities to be?
- ☐ \$0-\$50,000 ☒ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X Kristie Edna Bumstead
Kristie Edna Bumstead, Debtor 1
Executed on 02/06/2024
MM/ DD/ YYYY

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

/s/ Mark Charles McClure

Signature of Attorney for Debtor

Date 02/06/2024

MM / DD / YYYY

Mark Charles McClure

Printed name

Law Office of Mark McClure, PS

Firm name

1103 W Meeker St 101

Number Street

Kent

City

WA

State

98032

ZIP Code

Contact phone (253) 631-6484

Email address mark@mcclurelawgroup.com

24393

Bar number

WA

State

Fill in this information to identify your case and this filing:

Debtor 1	<u>Kristie</u>	<u>Edna</u>	<u>Bumstead</u>
	First Name	Middle Name	Last Name
<hr/>			
Debtor 2	<hr/>		
(Spouse, if filing)	First Name	Middle Name	Last Name
<hr/>			
United States Bankruptcy Court for the:	<u>Western</u>		District of <u>Washington</u>
Case number	<hr/>		

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

☐ No. Go to Part 2.

☒ Yes. Where is the property?

1.1 6229 Bock Avenue, Sumner, WA
98390

Street address, if available, or other description

6229 Bock Avenue

Sumner, WA 98390

City State ZIP Code

Pierce

County

What is the property? Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Source of Value: Zillow.com as of 10/31/2023

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$865,700.00

Current value of the portion you own?

\$865,700.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☒ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here



\$865,700.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

☐ No

☒ Yes

- 3.1 Make: Acura Who has an interest in the property? Check one.
Model: MDX ☐ Debtor 1 only
Year: 2022 ☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
Approximate mileage: _____ ☒ Check if this is community property (see instructions)
Other information:

Acura

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$40,770.00

Current value of the portion you own?

\$40,770.00

If you own or have more than one, describe here:

- 3.2 Make: Audi Who has an interest in the property? Check one.
Model: A6 ☐ Debtor 1 only
Year: 2017 ☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
Approximate mileage: _____ ☒ Check if this is community property (see instructions)
Other information:

Audi

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$15,210.00

Current value of the portion you own?

\$15,210.00

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☐ No
☒ Yes

- 4.1 Make: HEWESCRAFT 220 OCEAN Who has an interest in the property? Check one.
Model: Ocean Pro ☐ Debtor 1 only
Year: 2017 ☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
Other information: ☒ Check if this is community property (see instructions)

24" plus 2018 EZLOADER
TRAILER
VIN-1ZEZLJVT9JA001096
VIN: HIN-HEW82886G717

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$75,000.00

Current value of the portion you own?

\$75,000.00

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$130,980.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe.

See Attached.

\$11,250.00**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe.

Home Electronics

\$2,000.00**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe.**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☐ No☒ Yes. Describe.

Camping Gear at storage unit

Fishing Gear

\$1,300.00**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☐ No☒ Yes. Describe.

Firearms

\$3,000.00**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.

Clothing

\$500.00**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.

Jewelry

\$2,000.00

13. Non-farm animals*Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe.

2 Cats

2 Dogs

\$0.00**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific
information.**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**\$20,050.00**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☒ No☐ Yes Cash:**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes

Institution name:

17.1. Checking account:	<u>Checking account US Bank - 9499 - as of 2/5/2024</u>	<u>\$2,829.40</u>
17.2. Checking account:	<u>Heritage Bank - business account - as of 2/5/2024</u> <u>Account Number: 6022</u>	<u>\$465.73</u>
17.3. Checking account:	<u>Heritage Bank 6030 as of 2/5/2024</u>	<u>\$119.18</u>
17.4. Checking account:	<u>Law Office of Mark McClure - IOLTA (account has funds</u> <u>sufficient for filing fee).</u>	<u>unknown</u>
17.5. Savings account:	<u>Haborstone CU as of 2/5/2024</u> <u>Account Number: 3807</u>	<u>\$5.00</u>
17.6. Savings account:	<u>Whatcom Education CU as of 2/5/2024</u> <u>Account Number: 7813</u>	<u>\$167.53</u>
17.7. Savings account:	<u>Whatcom Education CU as of 2/5/2024</u> <u>Account Number: XX63S1</u>	<u>\$17.05</u>

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes Institution or issuer name:

_____	_____
_____	_____
_____	_____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☐ No☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Clarity Capital Management Corporation50.00%**Assets: DOR Refund pending \$3,381.****Liabilities:**\$0.00**Broken Lease - Van Doren \$246k****Others.****CLARITY TAX MANAGEMENT P.S.**100.00%**Aged AR greater than 90 days - \$4k face value - actual value likely zero.**unknown**dba Clarity Capital Management (sole proprietorship) - no independant entity value**100.00%\$0.00**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific information about them.....

Issuer name:

_____	_____
_____	_____
_____	_____

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☐ No☒ Yes. List each account separately.

Type of account:

Institution name:

401(k) or similar plan: 401(k) - Kristie\$89,951.00401(k) or similar plan: 401(k) - Matthew\$168,499.00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☐ No☒ Yes

Institution name or individual:

Security deposit on rental unit: **J AND M SUMNER PROPERTIES, LLC****\$3,400.00****23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes

Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☐ No☒ Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

Nest | Nest 529 Plan with Jill Bumstead listed as beneficiary; funded 15 years ago by husband's father.**\$0.00****25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☒ No☐ Yes. Give specific information about them. ...

--

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☒ No☐ Yes. Give specific information about them. ...

--

27. Licenses, franchises, and other general intangibles*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☒ No☐ Yes. Give specific information about them. ...

--

Money or property owed to you?**Current value of the portion you own?**
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**

☐ No☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

2023 | 1040 estimated

Federal: \$6,000.00

State: _____

Local: _____

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information.

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information.**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

Transamerican Life InsuranceKristie Bumstead and children
(purchaser / policy on non-filing
spouse).\$26,725.77**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim.

34. **Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim.35. **Any financial assets you did not already list**☐ No☒ Yes. Give specific information.

10/26/2022 Note with Robert Santorello re Purchase of "Book" - mutual default.

unknown

36. **Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here**

\$298,179.66

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.37. **Do you own or have any legal or equitable interest in any business-related property?**☐ No. Go to Part 6.☒ Yes. Go to line 38.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

38. **Accounts receivable or commissions you already earned**☐ No☒ Yes. Describe.

non-filing spouse - AR from SB Advisory, LLC under RINRA Rule 2040 - approximate \$30k - non-assignable.

\$0.00

39. **Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No☒ Yes. Describe.

Office Equipment, furnishings, and supplies

\$1,500.00

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe.41. **Inventory**☒ No☐ Yes. Describe.

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Describe

Name of entity:

% of ownership:

_____	_____	_____
_____	_____	_____
_____	_____	_____

43. Customer lists, mailing lists, or other compilations

- ☒ No
☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?
☐ No
☐ Yes. Describe:

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

**\$1,500.00****Part 6:**

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes

48. **Crops—either growing or harvested**☒ No☐ Yes. Give specific
information.49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**☒ No☐ Yes50. **Farm and fishing supplies, chemicals, and feed**☒ No☐ Yes51. **Any farm- and commercial fishing-related property you did not already list**☒ No☐ Yes. Give specific
information.52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** →

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above53. **Do you have other property of any kind you did not already list?***Examples: Season tickets, country club membership*☐ No☒ Yes. Give specific
information.

Potential Refund from WilmerHale -

unknown

54. **Add the dollar value of all of your entries from Part 7. Write that number here** →

\$0.00

Part 8: List the Totals of Each Part of this Form55. **Part 1: Total real estate, line 2** →

\$865,700.00

56. **Part 2: Total vehicles, line 5**

\$130,980.00

57. **Part 3: Total personal and household items, line 15**

\$20,050.00

58. **Part 4: Total financial assets, line 36**

\$298,179.66

59. **Part 5: Total business-related property, line 45**

\$1,500.00

60. **Part 6: Total farm- and fishing-related property, line 52**

\$0.00

61. **Part 7: Total other property not listed, line 54** +

\$0.00

Debtor Bumstead, Kristie Edna

Case number (if known) _____

62. **Total personal property.** Add lines 56 through 61.

\$450,709.66

Copy personal property total →

+ \$450,709.66

63. **Total of all property on Schedule A/B.** Add line 55 + line 62.

\$1,316,409.66

Debtor Bumstead, Kristie Edna

Case number (if known) _____

Continuation Page

6.	Household goods and furnishings	
	<u>Appliances</u>	<u>\$1,750.00</u>
	<u>Food staples in storage unit</u>	<u>\$100.00</u>
	<u>Hand Tools / Yard Tools</u>	<u>\$500.00</u>
	<u>Home Decor / Christmas Decor at storage unit.</u>	<u>\$100.00</u>
	<u>Household Goods and Furnishings</u>	<u>\$3,800.00</u>
	<u>Laser Engraver</u>	<u>\$5,000.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Kristie</u>	<u>Edna</u>	<u>Bumstead</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: 6229 Bock Avenue, Sumner, WA 98390 6229 Bock Avenue Sumner, WA 98390 Line from Schedule A/B: <u>1.1</u>	<u>\$865,700.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.13.030(b) (Allocated: \$445,700.00) _____ _____
Brief description: 2017 Audi A6 Audi Line from Schedule A/B: <u>3.2</u>	<u>\$15,210.00</u>	<input checked="" type="checkbox"/> <u>\$5,824.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(iv) _____ _____

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☐ No
- ☒ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☒ Yes

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: 2017 HEWESCRAFT 220 OCEAN Ocean Pro VIN: HIN-HEW82886G717 24" plus 2018 EZLOADER TRAILER VIN-1ZEZLJVT9JA001096	\$75,000.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____ _____
Line from Schedule A/B: 4.1			
Brief description: Household Goods and Furnishings	\$3,800.00	<input checked="" type="checkbox"/> \$3,800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____ _____
Line from Schedule A/B: 6			
Brief description: Appliances	\$1,750.00	<input checked="" type="checkbox"/> \$1,750.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____ _____
Line from Schedule A/B: 6			
		<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____ _____
Brief description: Laser Engraver	\$5,000.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____ _____
Line from Schedule A/B: 6			
		<input checked="" type="checkbox"/> \$5,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____ _____
Brief description: Hand Tools / Yard Tools	\$500.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____ _____
Line from Schedule A/B: 6			
		<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____ _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: Home Decor / Christmas Decor at storage unit. Line from Schedule A/B: 6	\$100.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: Food staples in storage unit Line from Schedule A/B: 6	\$100.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: Home Electronics Line from Schedule A/B: 7	\$2,000.00	<input checked="" type="checkbox"/> \$950.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: Camping Gear at storage unit Line from Schedule A/B: 9	\$300.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: Fishing Gear Line from Schedule A/B: 9	\$1,000.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit <input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____ Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____
Brief description: Firearms Line from Schedule A/B: 10	\$3,000.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____
Brief description: Clothing Line from Schedule A/B: 11	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(a) _____ _____

Debtor 1 **Kristie** **Edna** **Bumstead**
First Name Middle Name Last Name

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: Jewelry Line from Schedule A/B: 12	\$2,000.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(a) _____ _____
Brief description: 2 Dogs Line from Schedule A/B: 13	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: 2 Cats Line from Schedule A/B: 13	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(i) _____ _____
Brief description: Heritage Bank 6030 as of 2/5/2024 Checking account Line from Schedule A/B: 17	\$119.18	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____
Brief description: Heritage Bank - business account - as of 2/5/2024 Checking account Acct. No.: 6022 Line from Schedule A/B: 17	\$465.73	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____
Brief description: Whatcom Education CU as of 2/5/2024 Savings account Acct. No.: XX63S1 Line from Schedule A/B: 17	\$17.05	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____
Brief description: Whatcom Education CU as of 2/5/2024 Savings account Acct. No.: 7813 Line from Schedule A/B: 17	\$167.53	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii) _____ _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: Haborstone CU as of 2/5/2024 Savings account Acct. No.: 3807 Line from Schedule A/B: 17	\$5.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii)
Brief description: 401(k) - Kristie Line from Schedule A/B: 21	\$89,951.00	<input checked="" type="checkbox"/> \$89,951.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.020(3)
Brief description: 401(k) - Matthew Line from Schedule A/B: 21	\$168,499.00	<input checked="" type="checkbox"/> \$168,499.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.020(3)
Brief description: J AND M SUMNER PROPERTIES, LLC Security deposit on rental unit Line from Schedule A/B: 22	\$3,400.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(e)
Brief description: Nest Line from Schedule A/B: 24	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(f)
Brief description: 1040 estimated Federal tax Line from Schedule A/B: 28	\$6,000.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(d)(ii)
Brief description: Transamerican Life Insurance Line from Schedule A/B: 31	\$26,725.77	<input checked="" type="checkbox"/> \$26,725.77 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 48.18.410
Brief description: non-filing spouse - AR from SB Advisory, LLC under RINRA Rule 2040 - approximate \$30k - non-assignable. Line from Schedule A/B: 38	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Wash. Rev. Code. § 6.15.010(1)(e)

Debtor 1

Kristie

Edna

Bumstead

Case number (if known)

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<div>Brief description: Office Equipment, furnishings, and supplies</div>	<div>\$1,500.00</div>	<div><input checked="" type="checkbox"/> \$0.00</div> <div><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit</div>	<div>Wash. Rev. Code. § 6.15.010(1)(e)</div>
<div>Line from Schedule A/B: 39</div>			

Fill in this information to identify your case:

Debtor 1 Kristie Edna Bumstead
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Washington

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Column C

Unsecured portion

If any

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Directors Mortgage Creditor's Name <u>4550 SW Kruse Way Suite 275</u> Number Street <u>Lake Oswego, OR 97035</u> City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number _____	Describe the property that secures the claim: <u>\$420,000.00</u> <u>6229 Bock Avenue, Sumner, WA 98390</u> <u>6229 Bock Avenue Sumner, WA 98390</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<u>\$865,700.00</u>	<u>\$0.00</u>

Add the dollar value of your entries in Column A on this page. Write that number here:

\$420,000.00

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.2	<p>Harborstone Credit Union</p> <p>Creditor's Name PO Box 4207 Number Street Tacoma, WA 98438 City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>01/31/2022</u></p>	<p>Describe the property that secures the claim: <u>\$55,000.00</u></p> <p>2022 Acura MDX Acura</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number <u>2</u> <u>9</u> <u>4</u> <u>0</u></p>	<u>\$40,770.00</u>	<u>\$14,230.00</u>
2.3	<p>Horizon Credit Union</p> <p>Creditor's Name Attn: Bankruptcy 3224 E Mansfield Ave Number Street Spokane Valley, WA 99216 City State ZIP Code</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p>Describe the property that secures the claim: <u>\$56,874.00</u></p> <p>2017 HEWESCRAFT 220 OCEAN Ocean Pro 24" plus 2018 EZLOADER TRAILER VIN-1ZEZLJVT9JA001096</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number <u>4</u> <u>6</u> <u>8</u> <u>1</u></p>	<u>\$75,000.00</u>	<u>\$0.00</u>
Add the dollar value of your entries in Column A on this page. Write that number here:		<u>\$111,874.00</u>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		_____		

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C	
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
2.4	<u>J AND M SUMNER PROPERTIES, LLC</u> Creditor's Name <u>8015 118TH CT SE</u> Number Street <u>Renton, WA 98056</u> City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number _____ Remarks: Commercial Lease	Describe the property that secures the claim: <u>J AND M SUMNER PROPERTIES, LLC</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$38,012.00	\$3,400.00	\$34,612.00
2.5	<u>Live Oak Banking Co.</u> Creditor's Name <u>1741 Tiburon Dr</u> Number Street <u>Wilmington, NC 28403</u> City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>10/16/2016</u> Last 4 digits of account number <u>m e n t</u> Remarks: Surrender	Describe the property that secures the claim: <u>Clarity Capital Management Corporation Assets: DOR Refund pending \$3,381. Liabilities: Broken Lease - Van Doren \$246k Others.</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) <u>Business Related</u>	\$52,268.00	\$0.00	\$52,268.00
Add the dollar value of your entries in Column A on this page. Write that number here:		\$90,280.00			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:					

	Additional Page	Column A	Column B	Column C
Part 1:	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Amount of claim <small>Do not deduct the value of collateral.</small>	Value of collateral that supports this claim	Unsecured portion <small>If any</small>
2.6	<p><u>LPL Financial LLC</u> <small>Creditor's Name</small> <u>4707 Executive Dr</u> <small>Number Street</small> <u>San Diego, CA 92121</u> <small>City State ZIP Code</small></p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____ Last 4 digits of account number _____</p> <p>Remarks: UCC Lien - Matthew only: "ALL OF DEBTOR'S RIGHTS, TITLE AND INTEREST TO ALL ASSETS OF DEBTOR., WHETHER NOW OWNED OR HEREINAFTER ACQUIRED, WHEREVER LOCATED, AND ALL PROCEEDS, PRODUCT\$, REPLACEMENTS AND SUBSTITUTIONS THEREOF. "</p>	<p>Describe the property that secures the claim: <u>\$2,421,210.45</u></p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">See Attachment</div> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to <u>Business Related</u> offset)</p>	<u>\$5,103.89</u>	<u>\$2,416,106.56</u>
2.7	<p><u>Small Business Administration</u> <small>Creditor's Name</small> <u>2401 4th Ave Ste 450</u> <small>Number Street</small> <u>Seattle, WA 98121</u> <small>City State ZIP Code</small></p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred <u>7/14/2020</u> Last 4 digits of account number <u>8 0 1 0</u></p> <p>Remarks: Notice only - appears to be no personal guarantee.</p>	<p>Describe the property that secures the claim: <u>\$500,000.00</u> <u>\$0.00</u> <u>\$500,000.00</u></p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">Clarity Capital Management Corporation Assets: DOR Refund pending \$3,381. Liabilities: Broken Lease - Van Doren \$246k Others.</div> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to _____ offset)</p>	<u>\$2,921,210.45</u>	
Add the dollar value of your entries in Column A on this page. Write that number here:		<u>\$2,921,210.45</u>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		_____		

Part 1: Additional Page		Column A	Column B	Column C	
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
2.8	Small Business Administration Creditor's Name Attention Bankruptcy 2401 4th Ave Ste 450 Number Street Washington, DC 20416 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number <u>2</u> <u>1</u> <u>9</u> <u>9</u>	\$0.00	\$0.00	\$0.00
2.9	Small Business Administration Creditor's Name Attention Bankruptcy 2401 4th Ave Ste 450 Number Street Washington, DC 20416 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number <u>5</u> <u>0</u> <u>0</u> <u>1</u>	\$52,267.00	\$0.00	\$52,267.00
Add the dollar value of your entries in Column A on this page. Write that number here:		\$52,267.00			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:					

Part 1: Additional Page		Column A	Column B	Column C	
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
<u>2.10</u>	<p>Whatcom Educational Credit Union</p> <p>Creditor's Name</p> <p>Attn: Bankruptcy</p> <p>PO Box 9750</p> <p>Number Street</p> <p>Bellingham, WA 98227</p> <p>City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____ Last 4 digits of account number <u>1</u> <u>7</u> <u>0</u> <u>0</u></p>	<p>Describe the property that secures the claim:</p> <p>2017 Audi A6</p> <p>Audi</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p>	\$9,386.00	\$15,210.00	\$0.00
Add the dollar value of your entries in Column A on this page. Write that number here:		\$9,386.00			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$3,605,017.45			

Debtor 1 Kristie Edna Bumstead Case number (if known) _____
First Name Middle Name Last Name

Part 2: **List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<div>1. Markun Zusman Comptom</div> <div>Name</div> <div>Attn: Rick Smith</div> <div>465 California St Ste 401</div> <div>Number Street</div> <div>San Francisco, CA 94104-1812</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? <u>2.6</u></div> <div>Last 4 digits of account number _____</div>
<div>2. Gregory Tendrich, Esquire</div> <div>Name</div> <div>3010 N. Military Trail Suite 210</div> <div>Number Street</div> <div>Boca Raton, FL 33431</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? <u>2.6</u></div> <div>Last 4 digits of account number _____</div>
<div>3. FINRA Dispute Resolution, Inc</div> <div>Name</div> <div>300 S Grand Ave Ste 1700</div> <div>Number Street</div> <div>Los Angeles, CA 90071-3127</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? <u>2.6</u></div> <div>Last 4 digits of account number <u>0</u> <u>6</u> <u>8</u> <u>4</u></div>

Attachment Page

2.6

Describe the property that secures the claim:

Clarity Capital Management Corporation

Assets: DOR Refund pending \$3,381.

Liabilities:

Broken Lease - Van Doren \$246k

Others.

10/26/2022 Note with Robert Santorello re Purchase of "Book" - mutual default.

CLARITY TAX MANAGEMENT P.S.

Aged AR greater than 90 days - \$4k face value - actual value likely zero.

Heritage Bank - business account - as of 2/5/2024

Heritage Bank 6030 as of 2/5/2024

Office Equipment, furnishings, and supplies

Checking account US Bank - 9499 - as of 2/5/2024

Haborstone CU as of 2/5/2024

Whatcom Education CU as of 2/5/2024

Whatcom Education CU as of 2/5/2024

Fill in this information to identify your case:

Debtor 1 Kristie Edna Bumstead
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Washington

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1	Department of Labor & Industries Priority Creditor's Name Collections P.O. Box 44171 Number Street Olympia, WA 98504 City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	unknown	unknown	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
Remarks: Notice					

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			Total claim	Priority amount	Nonpriority amount
<u>2.2</u>	<u>Department of Revenue</u> Priority Creditor's Name <u>Bankruptcy/Claims</u> <u>2101 4th Ave Ste 1400</u> Number Street <u>Seattle, WA 98121-2300</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Notice	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	<u>unknown</u>	<u>unknown</u>	<u>\$0.00</u>
<u>2.3</u>	<u>Department of the Treasury</u> Priority Creditor's Name <u>Internal Revenue Service</u> <u>Internal Revenue Service</u> Number Street <u>Ogden, UT 84201</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 2 9 1</u> When was the debt incurred? <u>2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	<u>\$4,521.00</u>	<u>\$4,521.00</u>	<u>\$0.00</u>

Debtor 1 Kristie Edna Bumstead Case number (if known) _____
First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount
2.4	Employment Security Department Priority Creditor's Name UI Tax Admin P.O. Box 9046 Number Street Olympia, WA 98507-9046 City State ZIP Code	Last 4 digits of account number <u>6 0 0 8</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		\$3,381.03	\$3,381.03	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	<u>2210 Rimland LLC</u> Nonpriority Creditor's Name <u>c/o TALBOT REAL ESTATE, L.L.C.</u> <u>2219 RIMLAND DR STE 115</u> Number Street <u>Bellingham, WA 98226-8661</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Notification only - no personal obligation admitted.	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>\$0.00</u>
4.2	<u>Bank of America</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>4909 Savarese Circle</u> Number Street <u>Tampa, FL 33634</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9 4 9 3</u> When was the debt incurred? <u>03/2008</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<u>\$23,152.00</u>

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.3	<u>Chase Card Services</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy P.O. 15298</u> <u> </u> Number Street <u>Wilmington, DE 19850</u> City State ZIP Code	Last 4 digits of account number <u>7</u> <u>9</u> <u>6</u> <u>1</u> When was the debt incurred? <u>11/2014</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$2,349.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.4	<u>Davis & Goldmark, Inc.</u> Nonpriority Creditor's Name <u>PO Box 2009</u> <u> </u> Number Street <u>Riverside, CA 92516</u> City State ZIP Code	Last 4 digits of account number <u>6</u> <u>9</u> <u>2</u> <u>0</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Creditor</u>	\$3,892.12
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.5	<u>Discover Financial</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 3025</u> Number Street <u>New Albany, OH 43054</u> City State ZIP Code	Last 4 digits of account number <u>3</u> <u>1</u> <u>6</u> <u>1</u> When was the debt incurred? <u>06/2002</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$23.22
<p>Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			

4.6	<u>Express Employment Professionals</u> Nonpriority Creditor's Name <u>841 Central Avenue North #C-115</u> Number Street <u>Kent, WA 98032</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$0.00
<p>Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			

Remarks: Clarity Tax Management, LLC obligation - notice only

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7	<u>Gary Richardson</u> Nonpriority Creditor's Name <u>2360 Boy Scout Road</u> Number Street <u>Clearwater, FL 33763</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____ Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$50,000.00</u>
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4.8	<u>Helium Advisors</u> Nonpriority Creditor's Name <u>Atten: Howard Morin</u> <u>7047 E. Greenway Parkway; Ste 250</u> Number Street <u>Scottsdale, AZ 85254</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____ Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Notice	<u>unknown</u>
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Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.9	JSH Properties, Inc. Nonpriority Creditor's Name Attn: Cory O'Brien 509 Olive Way, Suite 1011 Number Street Seattle, WA 98101 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>m</u> <u>e</u> <u>n</u> <u>t</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Lease payments</u>	\$234,000.00
4.10	Lumen / Century Link Nonpriority Creditor's Name PO Box 52187 Number Street Phoenix, AZ 85072 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2</u> <u>8</u> <u>3</u> <u>6</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Utility</u>	\$4,128.72
4.11	Michael and Diane Bumstead Nonpriority Creditor's Name 63 Small Island Ln Number Street Lopez Island, WA 98261-8757 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Loan</u>	\$226,019.00

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.12	<u>Multicare Health Systems</u> Nonpriority Creditor's Name <u>PO Box 102809</u> Number Street <u>Pasadena, CA 91189</u> City State ZIP Code	Last 4 digits of account number <u>3</u> <u>1</u> <u>1</u> <u>7</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>		<u>\$1,089.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.13	<u>Nitrogen Wealth</u> Nonpriority Creditor's Name <u>470 Nevada Street</u> Number Street <u>Auburn, CA 95603</u> City State ZIP Code	Last 4 digits of account number <u>3</u> <u>5</u> <u>0</u> <u>9</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Related</u>		<u>\$1,727.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.14	<u>Pacific Life Insurance</u> Nonpriority Creditor's Name <u>P.O. Box 9000</u> Number Street <u>Newport Beach, CA 92658-9030</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice only - Clarity Capital management Corp debt.</u>		<u>unknown</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.15	<u>Pacific Office Automation</u> Nonpriority Creditor's Name <u>1111 Old Eagle School Rd</u> Number Street <u>Wayne, PA 19087</u> City State ZIP Code	Last 4 digits of account number <u>8</u> <u>2</u> <u>0</u> <u>4</u> When was the debt incurred? <u>2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____ Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,311.00</u>
4.16	<u>Phillip E. Multop</u> Nonpriority Creditor's Name <u>100 Easy Street Unit #2148</u> Number Street <u>Carefree, AZ 85377</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Creditor</u> Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Notice	<u>unknown</u>

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.17	<u>Pitney Bowes Global Financial Services</u> Nonpriority Creditor's Name <u>Attn Customer Service Department</u> <u>55 Jewelers Park Dr. Ste 300</u> Number Street <u>Neenah, WI 54956</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Utility</u>	<u>\$2,905.40</u>
4.18	<u>Romero Park P.S.</u> Nonpriority Creditor's Name <u>1019 W James St, Ste 102</u> Number Street <u>Kent, WA 98032</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>A 5 0 0</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Creditor</u>	<u>\$44,145.00</u>
4.19	<u>Service Finance Company</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 3025</u> Number Street <u>New Albany, OH 43054</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 9 1 6</u> When was the debt incurred? <u>09/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<u>\$18,000.00</u>

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.20	<u>Stericycle, Inc</u> Nonpriority Creditor's Name <u>28883 Network Place</u> Number Street <u>Chicago, IL 60673-1288</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 8 3 6</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>No Personal Obligation - Notice Only.</u>	\$0.00
4.21	<u>Synchrony Bank/Lowes</u> Nonpriority Creditor's Name <u>FL 32896 Attn: Bankruptcy Orlando,</u> <u>Po Box 965060</u> Number Street <u>City State ZIP Code</u> Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7 2 8 8</u> When was the debt incurred? <u>01/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u>	\$3,151.00
4.22	<u>Synchrony Bank/TJX</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy Dept</u> <u>PO Box 965060</u> Number Street <u>Orlando, FL 32896</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9 6 1 0</u> When was the debt incurred? <u>07/04/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$0.00

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.23	<u>Synovus Bank</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>1111 Bay Avenue</u> Number Street <u>Columbus, GA 31901</u> City State ZIP Code	Last 4 digits of account number <u>0 9 2 6</u> When was the debt incurred? <u>03/2018</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$421.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Cabelas Capital One			
4.24	<u>Talbot Group/Barkley Village</u> Nonpriority Creditor's Name <u>Attn: Leah Macaleer</u> <u>2219 Rimland Dr Suite 115</u> Number Street <u>Bellingham, WA 98226</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Lease payments</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Remarks: Debtors reached a settlement - for notice only.			

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.25	<u>US Bank/RMS</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 5229</u> Number Street <u>Cincinnati, OH 45201</u> City State ZIP Code	Last 4 digits of account number <u>7</u> <u>6</u> <u>9</u> <u>3</u> When was the debt incurred? <u>05/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	Total claim <u>\$3,354.00</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.26	<u>US Bank/RMS</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 5229</u> Number Street <u>Cincinnati, OH 45201</u> City State ZIP Code	Last 4 digits of account number <u>8</u> <u>6</u> <u>9</u> <u>9</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	Total claim <u>\$35,844.55</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.27	<u>Van Doren's Landing Office Plaza LLC</u>	Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	<u>\$0.00</u>
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Nonpriority Creditor's Name

c/o JSH Properties, Inc.

509 OLIVE WAY, STE 1011

Number Street

Seattle, WA 98101-1710

City State ZIP Code

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☒ Disputed

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify _____

Is the claim subject to offset?

☒ No

☐ Yes

Remarks: corporate obligation only - listed for notification.

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1.	Law Office of Benjamin E. Kelly		On which entry in Part 1 or Part 2 did you list the original creditor?	
	Name		Line <u>4.14</u> of (Check one):	
	9218 Roosevelt Way NE		<input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims	
	Number Street		<input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims	
			Last 4 digits of account number _ _ _ _	
	Seattle, WA 98115			
	City	State	ZIP Code	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$7,902.03
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$7,902.03
		Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$655,512.01
	6j. Total. Add lines 6f through 6i.	6j.	\$655,512.01

Fill in this information to identify your case:

Debtor 1	<u>Kristie</u>	<u>Edna</u>	<u>Bumstead</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1 <u>J AND M SUMNER PROPERTIES, LLC</u> Name <u>8015 118TH CT SE</u> Number Street <u>Renton, WA 98056</u> City State ZIP Code	Commercial Lease Contract to be ASSUMED
2.2 <u>Pacific Office Automation</u> Name <u>1111 Old Eagle School Rd</u> Number Street <u>Wayne, PA 19087</u> City State ZIP Code	Copy machine for business use Contract to be REJECTED
2.3 <u>Pitney Bowes Global Financial Services LLC</u> Name <u>Attn Customer Service Department</u> <u>55 Jewelers Park Dr. Ste 300</u> Number Street <u>Neenah, WI 54956</u> City State ZIP Code	Business equipment Contract to be REJECTED
2.4 _____ Name _____ Number Street _____ City State ZIP Code	

Fill in this information to identify your case:

Debtor 1 Kristie Edna Bumstead
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Washington

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No
☒ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☐ No. Go to line 3.

☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☒ Yes. In which community state or territory did you live? Washington. Fill in the name and current address of that person.

Bumstead, Matthew Thomas
Name of your spouse, former spouse, or legal equivalent
6229 Bock Avenue
Number Street
Sumner, WA 98390
City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 Bumstead, Matthew Thomas

Bumstead, Matthew Thomas
Name
6229 Bock Avenue
Number Street
Sumner, WA 98390
City State ZIP Code

☒ Schedule D, line 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.9, 2.10
☒ Schedule E/F, line
2.1, 4.1, 4.2, 2.2, 4.3, 2.3, 4.4, 2.4, 4.5, 4.6, 4.7, 4.8, 4.9,
4.10, 4.11, 4.12, 4.13, 4.15, 4.16, 4.17, 4.18, 4.19, 4.21,
4.22, 4.23, 4.24, 4.25, 4.26, 4.27

☐ Schedule G, line _____

3.2 CLARITY CAPITAL MANAGEMENT CORPORATION

CLARITY CAPITAL MANAGEMENT CORPORATION
Name
6229 Bock Avenue 110
Number Street
Sumner, WA 98390
City State ZIP Code

☒ Schedule D, line 2.5, 2.7, 2.8

☒ Schedule E/F, line 2.4, 4.14, 4.20

☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	<u>Kristie</u>	<u>Edna</u>	<u>Bumstead</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	_____		

Check if this is:

☐ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

☒ Employed ☐ Not Employed

Manager

CLARITY TAX MANAGEMENT P.S.

2210 RIMLAND DR 101
Number Street

Bellingham, WA 98226

City State Zip Code

How long employed there? _____

Debtor 2 or non-filing spouse

☒ Employed ☐ Not Employed

Owner

DBA CLARITY CAPITAL MANAGEMENT

909 Alder Ave Ste 102
Number Street

Sumner, WA 98390

City State Zip Code

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

2.

\$0.00

\$0.00

3. **Estimate and list monthly overtime pay.**

3.

+ \$0.00

+ \$0.00

4. **Calculate gross income.** Add line 2 + line 3.

4.

\$0.00

\$0.00

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here.....→	4.	\$0.00	\$0.00	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
5e. Insurance	5e.	\$0.00	\$0.00	
5f. Domestic support obligations	5f.	\$0.00	\$0.00	
5g. Union dues	5g.	\$0.00	\$0.00	
5h. Other deductions. Specify: _____	5h. +	\$0.00	+	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00	\$0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$24,510.19	\$0.00	
8b. Interest and dividends	8b.	\$0.00	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
8d. Unemployment compensation	8d.	\$0.00	\$0.00	
8e. Social Security	8e.	\$0.00	\$0.00	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	\$0.00	
8g. Pension or retirement income	8g.	\$0.00	\$0.00	
8h. Other monthly income. Specify: _____	8h. +	\$0.00	+	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$24,510.19	\$0.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$24,510.19	+	\$0.00 = \$24,510.19
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +			\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12.			\$24,510.19
Combined monthly income				
13. Do you expect an increase or decrease within the year after you file this form?				
<input type="checkbox"/> No.				
<input checked="" type="checkbox"/> Yes. Explain:	Income for the business and therefore for the debtor is anticipated to increase over the next 12 months. Debtor hopes that the increase will be in the range of 20%			

8a. Attached Statement

dba Clarity Capital Managment

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income:	<u>\$37,000.00</u>
--------------------------	--------------------

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Ordinary and necessary expense	<u>\$0.00</u>
3. Net Employee Payroll (Other than debtor)	<u>\$4,904.27</u>
4. Payroll Taxes	<u>\$400.00</u>
5. Unemployment Taxes	<u>\$0.00</u>
6. Worker's Compensation	<u>\$0.00</u>
7. Other Taxes	<u>\$0.00</u>
8. Inventory Purchases (Including raw materials)	<u>\$0.00</u>
9. Purchase of Feed/Fertilizer/Seed/Spray	<u>\$0.00</u>
10. Rent (Other than debtor's principal residence)	<u>\$1,750.00</u>
11. Utilities	<u>\$0.00</u>
12. Office Expenses and Supplies	<u>\$300.00</u>
13. Repairs and Maintenance	<u>\$0.00</u>
14. Vehicle Expenses	<u>\$0.00</u>
15. Travel and Entertainment	<u>\$187.39</u>
16. Equipment Rental and Leases	<u>\$0.00</u>
17. Legal/Accounting/Other Professional Fees	<u>\$0.00</u>
18. Insurance	<u>\$40.00</u>
19. Employee Benefits (e.g., pension, medical, etc.)	<u>\$2,219.93</u>
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts	
TOTAL PAYMENTS TO SECURED CREDITORS	<u>\$0.00</u>

21. Other Expenses		
Advertising & Marketing	<u>\$313.39</u>	
Bank Charges	<u>\$50.00</u>	
Dues and Subscriptions	<u>\$305.83</u>	
Software	<u>\$619.00</u>	
Tech Support (MCS)	<u>\$200.00</u>	
Postage	<u>\$0.00</u>	
Cell Phone and Internet	<u>\$700.00</u>	
Education/CE	<u>\$500.00</u>	
TOTAL OTHER EXPENSES		<u>\$2,688.22</u>
22. TOTAL MONTHLY EXPENSES(Add item 2 - 21)		<u>\$12,489.81</u>

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1)	<u>\$24,510.19</u>
--	--------------------

Fill in this information to identify your case:

Debtor 1	<u>Kristie</u>	<u>Edna</u>	<u>Bumstead</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	_____		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

<u>Daughter</u>	<u>19</u>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
<u>Child</u>	<u>16</u>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
<u>Child</u>	<u>12</u>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
<u>Child</u>	<u>21</u>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
<u>Spouse</u>	<u>45</u>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$3,871.00

If not included in line 4:

4a. Real estate taxes	4a. <u>\$0.00</u>
4b. Property, homeowner's, or renter's insurance	4b. <u>\$0.00</u>
4c. Home maintenance, repair, and upkeep expenses	4c. <u>\$500.00</u>
4d. Homeowner's association or condominium dues	4d. <u>\$0.00</u>

		Your expenses	
5.	Additional mortgage payments for your residence , such as home equity loans	5.	_____ \$0.00
6.	Utilities:		
6a.	Electricity, heat, natural gas	6a.	_____ \$350.00
6b.	Water, sewer, garbage collection	6b.	_____ \$230.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	_____ \$90.00
6d.	Other. Specify: _____ ADT	6d.	_____ \$75.00
7.	Food and housekeeping supplies	7.	_____ \$2,000.00
8.	Childcare and children's education costs	8.	_____ \$250.00
9.	Clothing, laundry, and dry cleaning	9.	_____ \$350.00
10.	Personal care products and services	10.	_____ \$200.00
11.	Medical and dental expenses	11.	_____ \$750.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	_____ \$570.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	_____ \$0.00
14.	Charitable contributions and religious donations	14.	_____ \$1,700.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	_____ \$300.00
15b.	Health insurance	15b.	_____ \$0.00
15c.	Vehicle insurance	15c.	_____ \$1,000.00
15d.	Other insurance. Specify: _____	15d.	_____ \$0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>See Additional Page</u>	16.	_____ \$3,550.00
17.	Installment or lease payments:		
17a.	Car payments for Vehicle 1 _____ 2022 Acura MDX	17a.	_____ \$1,076.58
17b.	Car payments for Vehicle 2 _____ 2017 Audi A6	17b.	_____ \$821.56
17c.	Other. Specify: _____ 401k Loans	17c.	_____ \$1,900.00
17d.	Other. Specify: _____	17d.	_____ \$0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	_____ \$0.00
19.	Other payments you make to support others who do not live with you. Specify: _____	19.	_____ \$0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a.	Mortgages on other property	20a.	_____ \$0.00
20b.	Real estate taxes	20b.	_____ \$0.00
20c.	Property, homeowner's, or renter's insurance	20c.	_____ \$0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	_____ \$0.00
20e.	Homeowner's association or condominium dues	20e.	_____ \$0.00

21. Other. Specify: See Additional Page

21. + \$400.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$19,984.14

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$19,984.14

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. \$24,510.19

23b. Copy your monthly expenses from line 22c above.

23b. - \$19,984.14

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$4,526.05

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here:

It is reasonably anticipated that certain household expenses and business expenses will increase as the income increases but at a lower rate.

Debtor 1 **Kristie** **Edna** **Bumstead**
First Name Middle Name Last Name

Case number (if known) _____

		Amount
6b. Water, sewer, garbage collection		
Garbage		\$80.00
Water/Sewer		\$150.00
12. Transportation: gas, maintenance, bus or train fare		
Fuel		\$300.00
Maintenance		\$250.00
GoodtoGo		\$20.00
16. Taxes		
RTA Tax		\$150.00
Self Employment Tax		\$3,400.00
21. Other		
Storage Unit		\$200.00
Pet Care		\$200.00

Fill in this information to identify your case:

Debtor 1	<u>Kristie</u>	<u>Edna</u>	<u>Bumstead</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	<u>\$865,700.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	<u>\$450,709.66</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$1,316,409.66</u>

Your assets

Value of what you own

Part 2: Summarize Your Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	<u>\$3,605,017.45</u>
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3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	<u>\$7,902.03</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	<u>\$655,512.01</u>

Your total liabilities

\$4,268,431.49

Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	<u>\$24,510.19</u>
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5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	<u>\$19,984.14</u>
---	--------------------

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☐ Your debts are primarily consumer debts. Consumer debts are those “incurred by an individual primarily for a personal, family, or household purpose.” 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☒ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	
9d. Student loans. (Copy line 6f.)	
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+
9g. Total. Add lines 9a through 9f.	

Fill in this information to identify your case:

Debtor 1	<u>Kristie</u>	<u>Edna</u>	<u>Bumstead</u>
	First Name	Middle Name	Last Name
<hr/>			
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
<hr/>			
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
<hr/>			
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.


Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.


X _____
Kristie Edna Bumstead, Debtor 1

Date 02/06/2024
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Kristie</u>	<u>Edna</u>	<u>Bumstead</u>
	First Name	Middle Name	Last Name
<hr/>			
Debtor 2	<hr/>		
(Spouse, if filing)	First Name	Middle Name	Last Name
<hr/>			
United States Bankruptcy Court for the:	<u>Western District of Washington</u>		
<hr/>			
Case number	<hr/>		
(if known)			

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
- ☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
- ☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<u>30506 SE 208th St</u> Number Street	From <u>8/2011</u> To <u>8/2023</u>	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u>Maple Valley, WA 98038</u> City State ZIP Code		<u></u> Number Street	<u></u> From <u></u> To <u></u>
		<u></u> City State ZIP Code	
<u></u> Number Street	From <u></u> To <u></u>	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u></u> City State ZIP Code		<u></u> Number Street	<u></u> From <u></u> To <u></u>
		<u></u> City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No
- ☒ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$15,000.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For last calendar year: (January 1 to December 31, <u>2023</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$15,625.04 \$2,087,080.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, <u>2022</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$89,600.00 \$2,087,080.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

☒ No

☐ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:				
For last calendar year: (January 1 to December 31, <u>2023</u>) YYYY				
For the calendar year before that: (January 1 to December 31, <u>2022</u>) YYYY				

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

☒ **No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

☐ No. Go to line 7.

☒ **Yes.** List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

☐ **Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☐ **Yes.** List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
US Bank Creditor's Name	10/27/23	\$24,146.37	\$0.00	<input type="checkbox"/> Mortgage
Number Street				<input checked="" type="checkbox"/> Car
City State ZIP Code				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other _____
WilmerHale Creditor's Name	01/30/2024	\$25,000.00	\$0.00	<input type="checkbox"/> Mortgage
2100 Pennsylvania Ave NW Number Street				<input type="checkbox"/> Car
Washington, DC 20037 City State ZIP Code				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input checked="" type="checkbox"/> Other <u>Legal Advisory Letter</u>
Gregory Tendrich, P.A. Creditor's Name	01/24/2024	\$8,927.50	\$0.00	<input type="checkbox"/> Mortgage
3010 N. Military Trail Suite 210 Number Street				<input type="checkbox"/> Car
Boca Raton, FL 33431 City State ZIP Code				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input checked="" type="checkbox"/> Other <u>Legal Services</u>

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☐ No
- ☒ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
<div>Bumstead, Michael and Diane</div> <div>Insider's Name</div> <div>63 Small Island Ln</div> <div>Number Street</div> <div>Lopez Island, WA 98261</div> <div>City State ZIP Code</div>	02/15/2023	\$114,380.00	\$226,019.00	Payments on various loans to debtors from non-filing spouse's parents over the years.
	08/17/2023			
	08/31/2023			
<div>Bumstead, Michael and Diane</div> <div>Insider's Name</div> <div>63 Small Island Ln</div> <div>Number Street</div> <div>Lopez Island, WA 98261-8757</div> <div>City State ZIP Code</div>	06/13/2023	\$8,700.00	\$0.00	Proceeds from the sale of NFS's parents' Polaris UTV to a third party. NFS facilitated the sale, collected the money, and paid it to his parents. Parents were not really a creditor but disclosure is being made because the funds did pass through Debtor's bank account with NSF acting as a fiduciary/implied trustee.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?
 Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
- ☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
				Include creditor's name
Insider's Name				
Number Street				
City State ZIP Code				

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?
 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
- ☒ Yes. Fill in the details.

Debtor 1 **Kristie** **Edna** **Bumstead** Case number (if known) _____

First Name Middle Name Last Name

	Nature of the case	Court or agency	Status of the case
Case title LPL Financial LLC vs Matthew Bumstead (non-filing spouse)	Dispute regarding an advance in non-filing spouse's employment.	FINRA Dispute Resolution, Inc	<input checked="" type="checkbox"/> Pending
Case number 23-00684		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input type="checkbox"/> Concluded
		City State ZIP Code	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☒ No. Go to line 11.

☐ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name			
Number Street			
City State ZIP Code			

Explain what happened

☐ Property was repossessed.

☐ Property was foreclosed.

☐ Property was garnished.

☐ Property was attached, seized, or levied.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☒ No

☐ Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name			
Number Street			
City State ZIP Code			

Last 4 digits of account number: XXXX- _ _ _ _

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☒ No

☐ Yes

Debtor 1 **Kristie** **Edna** **Bumstead**
First Name Middle Name Last Name

Case number (if known) _____

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City State ZIP Code			
Person's relationship to you _____			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☐ No

☒ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
The Church of Jesus Christ of Latter-day Saints Charity's Name	Tiething	Last 24 Mos	\$30,718.00
50 E N Temple St FL 15 Number Street			
Salt Lake City, UT 84150 City State ZIP Code			

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Boy Scouts of America Charity's Name	Contributions	Last 24 mos	\$2,000.00
Number Street			
City State ZIP Code			

Debtor 1 Kristie Edna Bumstead
First Name Middle Name Last Name

Case number (if known) _____

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

☒ Yes. Fill in the details.

Law Office of Mark McClure, PS Person Who Was Paid 1103 W Meeker St 101 Number Street Kent, WA 98032 City State ZIP Code Email or website address Bumstead Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Credit Report - Disbursement; Consultation/analysis re Insolvency/reorganization.; Consultation/analysis re Insolvency/reorganization.; Attorney's Fees; Attorney's Fees	12/27/2023	\$90.00
		10/12/2023	\$4,228.50
		1/23/2024	\$10,497.00
		02/06/2024	\$8,446.50
		02/06/2024	\$8,446.50

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

☒ No

☐ Yes. Fill in the details.

Person Who Was Paid Number Street City State ZIP Code	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
 Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
 Do not include gifts and transfers that you have already listed on this statement.

- ☐ No
- ☒ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
<div>Duffy's Auto Brokerage Auburn</div> <div>Person Who Received Transfer</div> <div>3204 Auburn Way N</div> <div>Number Street</div> <div>Auburn, WA 98002</div> <div>City State ZIP Code</div> <div>Person's relationship to you</div> <div>None</div>	F350 super duty diesel 2021	Sold for about \$57k - Consignment sale through Duffy Auto Dealership in Auburn WA. US Bank Loan secured by vehicle for about \$24k was paid off. Debtors netted \$32,761.84	November 2023
<div>Clarity Tax Group, LLC</div> <div>Person Who Received Transfer</div> <div>1910 120TH PL SE STE 201</div> <div>Number Street</div> <div>Everett, WA 98208</div> <div>City State ZIP Code</div> <div>Person's relationship to you</div> <div>None</div>	CLARITY TAX MANAGEMENT P.S.	Debtors recieved \$20k; Phillip Multop (shareholder creditor) received \$100k.	
<div>Craigslist Purchaser</div> <div>Person Who Received Transfer</div> <div>unknown</div> <div>Number Street</div> <div></div> <div>City State ZIP Code</div> <div>Person's relationship to you</div> <div>none</div>	\$5,000 - Sheffield Financial was paid off; balance was used to live on.	Side-by-side offroad vehicle with trailer.	Summer 2023
<div>Chase Sensky</div> <div>Person Who Received Transfer</div> <div>30506 SE 208th St</div> <div>Number Street</div> <div>Maple Valley, WA 98038</div> <div>City State ZIP Code</div> <div>Person's relationship to you</div> <div>None</div>	Sale of former Residence	30506 SE 208th St, Maple Valley, WA 98038. Sold for \$1,791,802.92; net of \$603,455. Funds deposited into Debtors US Bank 9499 Account; Bridge Loan for purchase of new home \$240k was paid off; About \$110k of credit cards paid; Funds to Husband's Parents - See SOFA; other;	8/17/2023

Debtor 1 Kristie Edna Bumstead Case number (if known) _____
First Name Middle Name Last Name

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust _____ _____	_____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No
☒ Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
US Bank Name of Financial Institution P.O. Box 5229 Number Street Cincinnati, OH 45201 City State ZIP Code	XXXX- m e n t <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	8/4/2023	\$301.46
Boeing Ecu Name of Financial Institution Po Box 97050 Number Street Seattle, WA 98124 City State ZIP Code	XXXX- 7 1 4 3 <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	01/16/2024	\$24.00
Boeing Ecu Name of Financial Institution Po Box 97050 Number Street Seattle, WA 98124 City State ZIP Code	XXXX- 7 1 5 1 <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	01/16/2024	\$2,300.00

Debtor 1 Kristie Edna Bumstead Case number (if known) _____

First Name Middle Name Last Name

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
---------------------------------	-------------------------------	--	---

US Bank

Name of Financial Institution

XXXX- 9 1 1 8

☒ Checking

02/05/2024

\$1,226.00

☐ Savings

☐ Money market

☐ Brokerage

☐ Other _____

Number Street

City State ZIP Code

US Bank

Name of Financial Institution

XXXX- 7 4 1 8

☒ Checking

02/05/2024

\$2.57

☐ Savings

☐ Money market

☐ Brokerage

☐ Other _____

Number Street

WA
City State ZIP Code

Security American

Name of Financial Institution

XXXX- 0 4 8 8

☐ Checking

10/2023

\$6,682.93

☐ Savings

☐ Money market

☐ Brokerage

☒ Other UTMA -
Brokerage
Account for
Minor 01

Number Street

City State ZIP Code

Security America

Name of Financial Institution

XXXX- 3 6 9 9

☐ Checking

10/2023

\$7,387.00

☐ Savings

☐ Money market

☐ Brokerage

☒ Other UTMA -
Brokerage
Account

Number Street

City State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☒ No

☐ Yes. Fill in the details.

Debtor 1 **Kristie** **Edna** **Bumstead** Case number (if known) _____

First Name Middle Name Last Name

Who else had access to it?		Describe the contents	Do you still have it?
<hr/>			<input type="checkbox"/> No
<hr/>			<input type="checkbox"/> Yes
<hr/>			
<hr/>			
<hr/>			
Name of Financial Institution		Name	
<hr/>		<hr/>	
Number Street		Number Street	
<hr/>		<hr/>	
<hr/>		City State ZIP Code	
City State ZIP Code			

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☐ No
- ☒ Yes. Fill in the details.

Who else has or had access to it?		Describe the contents	Do you still have it?
<hr/>		Holiday decor, son's military gear, camping gear, home decor, food storage.	<input type="checkbox"/> No
<hr/>			<input checked="" type="checkbox"/> Yes
<hr/>			
<hr/>			
<hr/>			
Best Storage NW		Name	
Name of Storage Facility		<hr/>	
<hr/>		<hr/>	
16290 Auto Ln		Number Street	
Number Street		<hr/>	
<hr/>		<hr/>	
<hr/>		City State ZIP Code	
Sumner, WA 98390-2568			
City State ZIP Code			

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☐ No
- ☒ Yes. Fill in the details.

Where is the property?	Describe the property	Value
<hr/>	UBC UTMA account for minor child x3700 as of 2/5/2024 (rollover from Security America 0489)	\$10,547.00
<hr/>		
<hr/>		
<hr/>		
<hr/>		
Minor 01		
Owner's Name	Number Street	
<hr/>	<hr/>	
6229 Bock Avenue	<hr/>	
Number Street	<hr/>	
<hr/>	<hr/>	
<hr/>	City State ZIP Code	
Sumner, WA 98390		
City State ZIP Code		

Debtor 1	Kristie	Edna	Bumstead	Case number (if known) _____
	First Name	Middle Name	Last Name	

	Where is the property?	Describe the property	Value
Minor 02 Owner's Name _____ _____ 6229 Bock Avenue Number Street _____ _____ Sumner, WA 98390 City State ZIP Code	Number Street _____ _____ City State ZIP Code	USB UTMA account for minor child x3701 - rollover from Security America UTMA 0488	\$7,320.00
Minor01 Owner's Name _____ _____ 6229 Bock Avenue Number Street _____ _____ Sumner, WA 98390 City State ZIP Code	Number Street _____ _____ City State ZIP Code	US Bank Checking Account X1653 as of 2/5/2024	\$4.65
Minor 02 Owner's Name _____ _____ 6229 Bock Avenue Number Street _____ _____ Sumner, WA 98390 City State ZIP Code	Number Street _____ _____ City State ZIP Code	US Bank Savings x7482	\$622.83
Minor 02 Owner's Name _____ _____ 6229 Bock Avenue Number Street _____ _____ Sumner, WA 98390 City State ZIP Code	Number Street _____ _____ City State ZIP Code	US Bank Savings x7474	\$860.38

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
- ☐ Yes. Fill in the details.

Debtor 1 **Kristie** **Edna** **Bumstead** Case number (if known) _____
First Name Middle Name Last Name

Governmental unit		Environmental law, if you know it	Date of notice
Name of site _____ Governmental unit _____			_____
Number _____	Street _____		
City _____ State _____ ZIP Code _____			

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site _____ Governmental unit _____			_____
Number _____	Street _____		
City _____ State _____ ZIP Code _____			

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title _____ Court Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____		

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☒ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

CLARITY CAPITAL MANAGEMENT CORPORATION
 Name
 6229 Bock Avenue
 Number Street
 Sumner, WA 98390
 City State ZIP Code

Describe the nature of the business

Brokerage; no longer doing business

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: 8 1 - 0 7 8 2 2 9 1

Name of accountant or bookkeeper

Dates business existed

From 01/04/2016 To _____

CLARITY TAX MANAGEMENT P.S.
 Name
 6229 Bock Avenue
 Number Street
 Sumner, WA 98390
 City State ZIP Code

Describe the nature of the business

Bookkeeping and Tax Preparation; assets sold 12/2023

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: 8 5 - 1 1 1 6 6 5 9

Name of accountant or bookkeeper

Dates business existed

From 10/27/202 To 12/31/2023

DBA CLARITY CAPITAL MANAGEMENT
 Name
 909 Alder Ave
 Number Street
 Sumner, WA 98390
 City State ZIP Code

Describe the nature of the business

Financial Services

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: 9 3 - 4 0 4 9 0 5 8

Name of accountant or bookkeeper

Dates business existed

Leah Gaye

From 10/2023 To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
- ☐ Yes. Fill in the details below.

Debtor 1	Kristie	Edna	Bumstead	Case number (if known) _____
	First Name	Middle Name	Last Name	
			Date issued	
Name _____		MM / DD / YYYY _____		
Number _____		Street _____		
City _____		State _____ ZIP Code _____		

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X Kristie Edna Bumstead
 Signature of Kristie Edna Bumstead, Debtor 1

Date 02/06/2024

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

United States Bankruptcy Court
Western District of Washington

In re Bumstead, Kristie Edna

Case No. _____

Debtor

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$23,262.00

Prior to the filing of this statement I have received \$23,262.00

Balance Due \$0.00

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify) Initial \$10k retainer paid by husband's parents - debtors repaid those funds per agreement.

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

02/06/2024
Date

/s/ Mark Charles McClure
Mark Charles McClure
Signature of Attorney

Bar Number: 24393
Law Office of Mark McClure, PS
1103 W Meeker St 101
Kent, WA 98032
Phone: (253) 631-6484

Law Office of Mark McClure, PS
Name of law firm

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF WASHINGTON
TACOMA DIVISION

IN RE: **Bumstead, Kristie Edna**

CASE NO

CHAPTER 11

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 02/06/2024

Signature 

Kristie Edna Bumstead, Debtor

2210 Rimland LLC

c/o TALBOT REAL ESTATE, L.L.C.
2219 RIMLAND DR STE 115
Bellingham, WA 98226-8661

Bank of America

Attn: Bankruptcy
4909 Savarese Circle
Tampa, FL 33634

Barclays

Attn: Bankruptcy
PO Box 8801
Wilmington, DE 19899

Boeing Employees C U

Po Box 97050
Seattle, WA 98124

Matthew Thomas Bumstead

6229 Bock Avenue
Sumner, WA 98390

Capital One

Attn: Bankruptcy
PO Box 30258
Salt Lake City, UT 84130

Cbna

Attn: Bankruptcy
P.O. Box 6497
Sioux Falls, SD 57117

Chase Card Services

Attn: Bankruptcy
P.O. 15298
Wilmington, DE 19850

Citibank/ The Home Depot

Citicorp Cr Srvs/Centralized Bankruptcy
PO Box 790040
St Louis, MO 63179

**CLARITY CAPITAL
MANAGEMENT CORPORATION**

6229 Bock Avenue 110
Sumner, WA 98390

Comenity Bank/ Eddie Bauer

Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

Davis & Goldmark, Inc.

PO Box 2009
Riverside, CA 92516

**Department of Labor &
Industries**

Collections
P.O. Box 44171
Olympia, WA 98504

Department of Revenue

Bankruptcy/Claims
2101 4th Ave Ste 1400
Seattle, WA 98121-2300

Department of the Treasury

Internal Revenue Service
Internal Revenue Service
Ogden, UT 84201

Directors Mortgage

4550 SW Kruse Way Suite 275
Lake Oswego, OR 97035

Discover Financial

Attn: Bankruptcy
PO Box 3025
New Albany, OH 43054

**Employment Security
Department**

UI Tax Admin
P.O. Box 9046
Olympia, WA 98507-9046

**Express Employment
Professionals**

841 Central Avenue North # C-115
Kent, WA 98032

**FINRA Dispute Resolution,
Inc**

300 S Grand Ave Ste 1700
Los Angeles, CA 90071-3127

Gary Richardson

2360 Boy Scout Road
Clearwater, FL 33763

Gregory Tendrich, Esquire

3010 N. Military Trail Suite 210
Boca Raton, FL 33431

Harborstone Credit Union

PO Box 4207
Tacoma, WA 98438

Helium Advisors

Atten: Howard Morin
7047 E. Greenway Parkway; Ste 250
Scottsdale, AZ 85254

Horizon Credit Union

Attn: Bankruptcy
3224 E Mansfield Ave
Spokane Valley, WA 99216

**J AND M SUMNER
PROPERTIES, LLC**

8015 118TH CT SE
Renton, WA 98056

JSH Properties, Inc.

Attn: Cory O'Brien
509 Olive Way, Suite 1011
Seattle, WA 98101

Kohls/ Capital One

Attn: Credit Administrator
PO Box 3043
Milwaukee, WI 53201

Kreider Hughes Law, PLLC

Attention: Patrice Kreider-Hughes
P.O. Box 27372
Seattle, WA 98165

**Law Office of Benjamin E.
Kelly**

9218 Roosevelt Way NE
Seattle, WA 98115

Live Oak Banking Co.

1741 Tiburon Dr
Wilmington, NC 28403

LPL Financial LLC

4707 Executive Dr
San Diego, CA 92121

Lumen / Century Link

PO Box 52187
Phoenix, AZ 85072

Macys/ fdsb

Attn: Bankruptcy
9111 Duke Boulevard
Mason, OH 45040

Markun Zusman Comptom

Attn: Rick Smith
465 California St Ste 401
San Francisco, CA 94104-1812

Michael and Diane Bumstead

63 Small Island Ln
Lopez Island, WA 98261-8757

Multicare Health Systems

PO Box 102809
Pasadena, CA 91189

Nitrogen Wealth

470 Nevada Street
Auburn, CA 95603

Pacific Life Insurance

P.O. Box 9000
Newport Beach, CA 92658-9030

Pacific Office Automation

1111 Old Eagle School Rd
Wayne, PA 19087

Phillip E. Multop

100 Easy Street Unit # 2148
Carefree, AZ 85377

**Pitney Bowes Global Financial
Services**

Attn Customer Service Department
55 Jewelers Park Dr. Ste 300
Neenah, WI 54956

**Pitney Bowes Global Financial
Services LLC**

Attn Customer Service Department
55 Jewelers Park Dr. Ste 300
Neenah, WI 54956

Romero Park P.S.

1019 W James St, Ste 102
Kent, WA 98032

Service Finance Company

Attn: Bankruptcy
PO Box 3025
New Albany, OH 43054

**Small Business
Administration**

2401 4th Ave Ste 450
Seattle, WA 98121

**Small Business
Administration**

Attention Bankruptcy
2401 4th Ave Ste 450
Washington, DC 20416

Stericycle, Inc

28883 Network Place
Chicago, IL 60673-1288

Synchrony Bank/ Old Navy

FL 32896
Attn: Bankruptcy
Orlando,
Po Box 965060

Synchrony Bank/ JCPenney

FL 32896
Attn: Bankruptcy
Orlando,
Po Box 965060

Synchrony Bank/ Lowes

FL 32896
Attn: Bankruptcy
Orlando,
Po Box 965060

Synchrony Bank/ TJX

Attn: Bankruptcy Dept
PO Box 965060
Orlando, FL 32896

Synchrony/ PayPal Credit

FL 32896
Attn: Bankruptcy
Orlando,
PO Box 965060

Synovus Bank

Attn: Bankruptcy
1111 Bay Avenue
Columbus, GA 31901

Talbot Group/ Barkley Village

Attn: Leah Macaleer
2219 Rimland Dr Suite 115
Bellingham, WA 98226

US Bank/ RMS

Attn: Bankruptcy
PO Box 5229
Cincinnati, OH 45201

**Van Doren's Landing Office
Plaza LLC**

c/o JSH Properties, Inc.
509 OLIVE WAY, STE 1011
Seattle, WA 98101-1710

**Whatcom Educational Credit
Union**

Attn: Bankruptcy
PO Box 9750
Bellingham, WA 98227